



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

[illegible]

**Group Art Unit: Unknown**

**Examiner:** Unassigned

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Technology Center 2100

Sir:

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

**BURNS, DOANE, SWECKER & MATHIS, L.L.P.**

By: Kenneth B. Leffler  
Kenneth B. Leffler  
Registration No. 36,075

P.O. Box 1404  
Alexandria, Virginia 22313-1404  
(703) 836-6620

## APPLICATION DATA SHEET

### Application Information

Application Number::	09/856,552
Filing Date::	May 23, 2001
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of Copies of CRF::	
Title::	SYSTEM AND METHOD FOR TRANSMITTING LOCALLY HELD INFORMATION IN A LOOSELY COUPLED MULTIPROCESSOR SYSTEM
Attorney Docket Number::	060000-046
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	7
Small Entity?::	
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	No

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Siren

Middle Name::

Family Name:: Ollfors

Name Suffix::

City of Residence:: Göteborg

State or Province of Residence::

Country of Residence:: SWEDEN

Street of Mailing Address:: Iskällarliden 14 A

City of Mailing Address:: S-416 55 Göteborg

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing

Address:: S-416 55

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Chris

Middle Name::

Family Name:: KANNAS

Name Suffix::

City of Residence:: Vårgårda

State or Province of Residence::

Country of Residence:: SWEDEN

Street of Mailing Address:: Pl. 3256 Ornunga

City of Mailing Address:: S-447 93 Vårgårda

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing

Address:: S-447 93

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Annika

Middle Name::

Family Name:: OHLSSON

Name Suffix::

City of Residence:: Hisings Kärä

State or Province of Residence::

Country of Residence:: SWEDEN

Street of Mailing Address:: Ingåsvägen 18

City of Mailing Address:: S-425 65 Hisings Kärä

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing

Address:: S-425 65

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Nicholas

Middle Name::

Family Name:: Wood

Name Suffix::

City of Residence:: Belfast

State or Province of Residence:: Ireland

Country of Residence:: UNITED KINGDOM

Street of Mailing Address:: 31 Lucerne Parade

City of Mailing Address:: Belfast

State or Province of Mailing Address:: Ireland

Country of Mailing Address:: UNITED KINGDOM

Postal or Zip Code of Mailing  
Address:: BT9 5FT

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name:: Anders

Middle Name::

Family Name:: ÅHLÉN

Name Suffix::

City of Residence:: Billdal

State or Province of Residence::

Country of Residence:: SWEDEN

Street of Mailing Address:: Sösbacken 57

City of Mailing Address:: S-427 34 Billdal

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing

S-427 34

Address::

### Correspondence Information

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

### Representative Information

Representative Customer Number:: 21839

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	9804027-2	11/24/98	Yes

### Assignee Information

Assignee Name::

TELEFONAKTIEBOLAGET LM ERICSSON (PUBL)

Street of Mailing Address:: SE-126 25  
City of Mailing Address:: Stockholm  
State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing SE-126 25  
Address::